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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Urbano First name	First name		
		Middle name	Middle name		
	Bring your picture identification to your meeting with the trustee.	Villasano Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years				
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1016			

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINS
5.	Where you live		If Debtor 2 lives at a different address:
		747 Aurora Ave Aurora, IL 60506	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Kane	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Debtor 1 Urbano Villasano

ar	t 2: Tell the Court About	Your B	Bankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice</i> of page 1 and check th		. § 342(b) for Individuals Filing for E	Bankruptcy
	choosing to file under	■ C	hapter 7					
		□с	hapter 11					
		□с	hapter 12					
		□с	hapter 13					
3.	How you will pay the fee	•	about how yo	ou may pay. Ty attorney is sub	pically, if you are payi	ng the fee yourself, yo	e clerk's office in your local court for ou may pay with cash, cashier's che attorney may pay with a credit card	eck, or money
			I need to pay		nd attach the Application for Individ	duals to Pay		
☐ I request that my fee be waived (You may request is not required to, waive your fee, and may dapplies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee					est this option only if y so only if your incom- pay the fee in installm	e is less than 150% of the official poents). If you choose this option, you	overty line that	
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
			District		Whe	າ	Case number	
			District		Whe	າ	Case number	
			District		Whe	n	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is	■ No						
	not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor				Relationship to you	
			District		Whe	າ	Case number, if known	
			Debtor				Relationship to you	
			District		Whe	າ	Case number, if known	
11.	Do you rent your	□ No	o. Go to I	ine 12.				
	residence?	■ Ye	es. Has yo	our landlord obt	ained an eviction judg	ment against you and	do you want to stay in your resider	nce?
			•	No. Go to line	12.			
				Yes. Fill out II bankruptcy pe		an Eviction Judgmen	t Against You (Form 101A) and file	it with this

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Part	t 3: Report About Any Bu	sinesses	You Owr	n as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	s. If you ir is, cash-fl i.C. 1116(	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).  not filing under Chapter 11.			
	For a definition of small	No.	raini	to ming under enapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code.			
		☐ Yes.	l am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	■ No.	If immed	the hazard?  diate attention is , why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?  Number, Street, City, State & Zip Code			

Debtor 1 Urbano Villasano

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Debtor 1 Urbano Villasano

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 52 Case number (if known) Debtor 1 **Urbano Villasano** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Urbano Villasano Urbano Villasano Signature of Debtor 2 Signature of Debtor 1 Executed on June 29, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Urbano Villasano

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Carolin	e M. Hernandez	Date	June 29, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Caroline N	/I. Hernandez		
Hernande:	z Law Office Ltd.		
76 S. Grov Elgin, IL 6			
Number, Street,	City, State & ZIP Code		
Contact phone	847-468-1200	Email address	carolinehdz@yahoo.com
6273476			
Bar number & S	tate		

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Page 8 of 52 Document Fill in this information to identify your case: **Urbano Villasano** First Name Middle Name Last Name First Name Middle Name Last Name (Spouse if, filing)

> ☐ Check if this is an amended filing

### Official Form 106Sum

United States Bankruptcy Court for the:

Debtor 1

Debtor 2

Case number (if known)

### Summary of Your Assets and Liabilities and Certain Statistical Information

NORTHERN DISTRICT OF ILLINOIS

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	ccate
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	26,356.15
	1c. Copy line 63, Total of all property on Schedule A/B	\$	26,356.15
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	129,556.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	94,841.89
	Your total liabilities	\$	224,397.89
Pa	t 3: Summarize Your Income and Expenses	1	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,410.97
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,022.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other scl	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Urbano Villasano

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Desc Main Case 16-21163 Doc 1 Filed 06/29/16 Entered 06/29/16 17:46:52 6/29/16 5:45PM Document Page 10 of 52 Fill in this information to identify your case and this filing: Debtor 1 **Urbano Villasano** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **BMW** 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: 330i Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2003 Debtor 2 only Current value of the Current value of the 169000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another This vehicle is owned and title \$4,000.00 \$4,000.00 ☐ Check if this is community property in Debtor's wife name (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$4.000.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Urbano Villasano		Document	Page 11 of 52 Case number (if known	)
■ Yes.	Describe				
			offee table, end table s, silverware, area ru	e, queen bed, nightstands, ugs,	\$1,200.00
□No				oment; computers, printers, scanners; music	collections; electronic devices
	two ce	Ilphones, tv	wo televisions, lapto	p, Dvd Player, playstation	\$900.00
Exampl  No	ibles of value les: Antiques and figurines; other collections, mem Describe			oks, pictures, or other art objects; stamp, coi	n, or baseball card collections;
Exampl	nent for sports and hobbides: Sports, photographic, e musical instruments  Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotgun Describe	s, ammunitio	n, and related equipmen	t	
□ No	es  ples: Everyday clothes, furs  Describe	s, leather coat	ts, designer wear, shoes	, accessories	
	Clothir	ng, shoes a	nd accessories		\$400.00
■ No □ Yes. 13. <b>Non-fa</b> Examp			engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
■ No	ther personal and househ	-	u did not already list, i	ncluding any health aids you did not list	
	the dollar value of all of y art 3. Write that number h		· · · · · · · · · · · · · · · · · · ·	ny entries for pages you have attached	\$2,500.00
	escribe Your Financial Assets				
Do you ov	wn or have any legal or ed	quitable inter	est in any of the follow	ring?	Current value of the portion you own?  Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Urbano Villasano** 16 Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking **Earth Movers Credit Union** \$100.00 Wells Fargo \$500.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 **Urbano Villasano** ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims □ No Yes. Describe each claim....... \$19,256.15 Settlement from Worker Compensation claim 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$19,856.15 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 16-21163

Doc 1

Filed 06/29/16

Entered 06/29/16 17:46:52

Desc Main

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	you own or have any legal or equ	uitable interest	in any husinoss-rolated n			
_	lo. Go to Part 6.	illable iliterest	iii aily busilless-leialeu p	roperty:		
	es. Go to line 38.					
	C3. G0 t0 line 50.					
	<b>-</b>					
Part 6	Describe Any Farm- and Comm If you own or have an interest in f			n or Have an Interest In.		
40 <b>D</b>						
_	o you own or nave any legal o ■ No. Go to Part 7.	r equitable in	terest in any tarm- or o	commercial fishing-related property?		
_	_					
L	Yes. Go to line 47.					
Part 7	Describe All Property You	Own or Have a	n Interest in That You Did	l Not List Above		
53 <b>D</b>	o you have other property of a	any kind you (	did not already list?			
	Examples: Season tickets, count					
	No					
	Yes. Give specific information					
54.	Add the dollar value of all of y	our entries fr	om Part 7. Write that n	umber here	-	\$0.00
					•	
Part 8	List the Totals of Each Part	of this Form				
55. I	Part 1: Total real estate, line 2					\$0.00
56. I	Part 2: Total vehicles, line 5			\$4,000.00		
57. l	Part 3: Total personal and hou	sehold items	, line 15	\$2,500.00		
58. I	Part 4: Total financial assets,	line 36	_	\$19,856.15		
59. I	Part 5: Total business-related	property, line	45	\$0.00		
60 I	Part 6: Total farm- and fishing	-related prop	erty line 52	\$0.00		

\$0.00

Copy personal property total

\$26,356.15

63. Total of all property on Schedule A/B. Add line 55 + line 62

61. Part 7: Total other property not listed, line 54

62. **Total personal property.** Add lines 56 through 61...

\$26,356.15

\$26,356.15

		Docume	nt Page 15 of 52				
Fill in this information to identify your case:							
Debtor 1	Urbano Villasano	•					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)				☐ Check if this is a amended filing	an		

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	You Claim as Exempt
-------------------------------	---------------------

1.	Which set of exemp	tions are y	ou claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	-------------	--------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2003 BMW 330i 169000 miles This vehicle is owned and title in	\$4,000.00	•	\$2,400.00	735 ILCS 5/12-1001(c)
	Debtor's wife name Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2003 BMW 330i 169000 miles This vehicle is owned and title in	\$4,000.00		\$1,600.00	735 ILCS 5/12-1001(b)
	Debtor's wife name Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Sofa, love seat, coffee table, end table, queen bed, nightstands, pots,	\$1,200.00		\$1,200.00	735 ILCS 5/12-1001(b)
	pans, dishes, silverware, area rugs, Line from <i>Schedule A/B</i> : <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
	two cellphones, two televisions, laptop, Dvd Player, playstation	\$900.00		\$900.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Clothing, shoes and accessories Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
	Line nom <i>Schedule A/B</i> . 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-21163 Doc 1 Filed 06/29/16 Entered 06/29/16 17:46:52 Desc Main 6/29/16 5:45PM Document Page 16 of 52 **Urbano Villasano** Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Earth Movers Credit Union** 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Wells Fargo** 735 ILCS 5/12-1001(b) \$200.00 \$500.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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Case 16-21163 Doc 1 Desc Main Document Page 17 of 52 Fill in this information to identify your case: Debtor 1 **Urbano Villasano** Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any Ocwen Loan Sevicing Llc Describe the property that secures the claim: \$129,556.00 Unknown \$129,556.00 **Real Estate Mortgage** Attn: Research Dept 1661 Worthington Rd As of the date you file, the claim is: Check all that Ste 100 West Palm Beach, FL ☐ Contingent 33409 Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Opened 10/05 Last Active 5592 Date debt was incurred 4/30/13 Last 4 digits of account number

\$129,556.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$129,556.00 Write that number here:

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Document Page 18 of 52 Fill in this information to identify your case: Debtor 1 **Urbano Villasano** First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **Atg Credit LIc** 6665 \$781.00 Last 4 digits of account number Nonpriority Creditor's Name 1700 W Cortland St When was the debt incurred? **Opened 11/14** Ste 2 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Joliet Radiological S.C.

Page 19 of 52 Case number (if know) Document

Debto	T1 Urbano Villasano	Case number (if know)	
4.2	Atg Credit Llc Nonpriority Creditor's Name	Last 4 digits of account number 1214	\$299.00
	1700 W Cortland St	When was the debt incurred? Opened 04/15	
	Ste 2	<u> </u>	
	Chicago, IL 60622  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Continued.	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Empact Emergency Physicians L	
4.3	ATI Physical Therapy Nonpriority Creditor's Name	Last 4 digits of account number 4430	\$16,785.00
	790 Remington Blvd Bolingbrook, IL 60440	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Aurora Emergency Associates	Last 4 digits of account number 6501	\$56.01
	Nonpriority Creditor's Name P.O. Box 5990 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	

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Case number (if know)

4.5	Cap1/carsn	Last 4 digits of account number	2261	\$0.00
	Nonpriority Creditor's Name  Po Box 30253 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/24/06 Last Active 6/30/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Latet	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	☐ Yes	Other. Specify     Charge Acceptable		
4.6	Comenity Bank/Carsons  Nonpriority Creditor's Name	Last 4 digits of account number	9183	\$383.00
	Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 07/12 Last Active 4/29/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc		
4.7	Commonwealth Financial Systems  Nonpriority Creditor's Name	Last 4 digits of account number	38N1	\$56.00
	245 Main St	When was the debt incurred?	Opened 10/14	
	Dickson City, PA 18519			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	No	Debts to pension or profit-sharin		
		, ,	•	
	□ Yes	Other. Specify Collection		

Debtor 1 Urbano Villasano

Debte	Case 16-21163 Doc 1  Or 1 Urbano Villasano	Filed 06/29/16 Entered 06/29/16 17:46:52 Desc Ma  Document Page 21 of 52  Case number (if know)	6/29/16 5:45PN
4.8	Convergent Outsoucing, Inc	Last 4 digits of account number 9811	\$262.00
	Nonpriority Creditor's Name Po Box 9004 Renton, WA 98057	When was the debt incurred? Opened 11/13	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Attorney Comcast	
4.9	Creditors Discount & Audit Co.	Last 4 digits of account number 6900	\$58.00
	Nonpriority Creditor's Name 415 E. Main St., Streator, IL 61364	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
4.1	Fox Valley Cardiovascular		
0	Consultan	Last 4 digits of account number 0165	\$32.94
	Nonpriority Creditor's Name P.O. Box 2091 Aurora, IL 60507	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	- 1 L	

debt

■ No ☐ Yes ☐ Student loans

Other. Specify

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

 $\hfill\square$  Check if this claim is for a community

Is the claim subject to offset?

Document

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Debtor	1 Urbano Villasano	Case number (if know)	
4.1	IL Bone and Joint Institute CH	Last 4 digits of account number 4536	\$543.00
	Nonpriority Creditor's Name 5057 Paysphere Circle Chicago, IL 60674	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Joliet Radiological S.C.	Last 4 digits of account number 3985	\$781.00
	Nonpriority Creditor's Name 36910 Treasury Center Chicago, IL 60694	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1	Lou Harris Company	Last 4 digits of account number 5688	\$720.00
. لت	Nonpriority Creditor's Name		
	1040 S Milwaukee Ave Ste Wheeling, IL 60090	When was the debt incurred? Opened 05/13	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	— NO		
	□Yes	Collection Attorney Ambulatory Anesthesiologists O	

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4.1 \$768.00 Mrsi 5081 Last 4 digits of account number 4 Nonpriority Creditor's Name 2250 E Devon Ave Ste 352 When was the debt incurred? **Opened 09/14** Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Rush Copley Memorial** ☐ Yes Other. Specify Hospital 4.1 **Nationwide Credit & Collection Inc** 9601 \$309.52 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o Evergreen Bank Group P.O. bodx 3219 Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **R000 Neuro Oversight LLC** \$3,300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2024 Hickory Rd, St 301 Homewood, IL 60430 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Debtor 1 Urbano Villasano

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Page 24 of 52 Case number (if know) Debtor 1 Urbano Villasano Urbano 4.1 **Preferred Captial Funding** \$4,471.00 7 Last 4 digits of account number Villasano Nonpriority Creditor's Name 368 W. Huron St When was the debt incurred? Suite 4S Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Provena Mercy Medical Center** \$681.15 8697 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? 75 Remittance Dr. Suite 1871 Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Rush Copley Medical Center** 0165 \$20.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 2000 Oegden Ave. When was the debt incurred? Aurora, IL 60504 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

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4.2	Rush University Medical Group	Last 4 digits of account number 8096	\$480.93
	Nonpriority Creditor's Name 75 Remittance Dr. Dept 1611	When was the debt incurred?	
	Chicago, IL 60675  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Saint Joseph Hospital PL	Last 4 digits of account number 9404	\$60,542.38
	Nonpriority Creditor's Name 2900 North Lake Shore Drive Chicago, IL 60657	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.2	Smithfield	Urbano Last 4 digits of account number Villasano	\$768.96
	Nonpriority Creditor's Name 410 Kirk Road Saint Charles II 60174	When was the debt incurred?	
	Saint Charles, IL 60174  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debtor	1 Urbano Villasano		Case number (if know)				
4.2	VNA Health Care		6558	\$184.00			
3	Nonpriority Creditor's Name	Last 4 digits of account number		φ104.00			
	400 North Highland Ave Aurora, IL 60506	When was the debt incurred?	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes		· 				
4.2	Walla Farra Daula Oand		0047	<b>\$0.550.00</b>			
4	Wells Fargo Bank Card  Nonpriority Creditor's Name	Last 4 digits of account number	9917	\$2,559.00			
	Mac F82535-02f		Opened 08/08 Last Active				
	Po Box 10438	When was the debt incurred?	2/12/12				
	Des Moines, IA 50306						
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	_						
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed	•				
	At least one of the debtors and another	Type of NONPRIORITY unsecure					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharir					
		, ,	<b>01</b>				
	☐ Yes	Other. Specify Credit Card					
4.2 5	Windy City Anesthesia PC	Last 4 digits of account number	4251	\$0.00			
	Nonpriority Creditor's Name 21120 Washington Parkway Frankfort, IL 60423	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	- -	,				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other, Specify					

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Urbano Villasano

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 94,841.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 94,841.89

Page 28 of 52 Document Fill in this information to identify your case: Debtor 1 **Urbano Villasano** First Name Middle Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<del></del>
					<u> </u>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	O:t-		04-4-	7ID 0 I -	_
2.4	City		State	ZIP Code	
2.4	Name				<u> </u>
	ivallie				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.5	Oity		Otate	Zii Oode	
	Name				<del>_</del>
	Number	Street			<u> </u>
	Number	Sileei			
	City		State	ZIP Code	<del>_</del>

	Case 10-21103 1	Docume		00/23/10 17.40.32 of 52	6/29/16 5:45PN
Fill in thi	s information to identify your				
Debtor 1	Urbano Villasano				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
•				_	
Case nur (if known)	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
ill it out, our nam	and number the entries in the e and case number (if known)	boxes on the left. Attach . Answer every question.	the Additional Page to	o this page. On the top of	led, copy the Additional Page, any Additional Pages, write
1. DC	you have any codebtors? (If	ou are filing a joint case, c	to not list either spouse	as a codebtor.	
■ No					
☐ Ye	es				
	thin the last 8 years, have you na, California, Idaho, Louisiana,				ates and territories include
■ No	o. Go to line 3.				
□Y€	es. Did your spouse, former spou	ıse, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make s	sure you have listed the o	ith you. List the person shown creditor on Schedule D (Official nedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt nat apply:
3.1				☐ Schedule D, line	
	Name			□ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	=	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	

ZIP Code

State

City

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	in this information to identify your captor 1  Urbano Villa								
	otor 2				- -				
	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
(If kr	se number nown)						ed filing ent showir	ng postpetition cl following date:	napter
	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your Inc	ome							12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	r spouse is not filing wi	th you, do not inclu	de inform	natio	n about your sp	ouse. If m	ore space is ne	eded,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-f	iling spouse	
	If you have more than one job,	Employment status	■ Employed			■ Emp	oyed		
	attach a separate page with information about additional	Linployment status	☐ Not employed			☐ Not €	☐ Not employed		
	employers.	Occupation	Unemployed			QC spe	ecialist		
	Include part-time, seasonal, or self-employed work.	Employer's name				Aquag	enics Te	chnologies	
	Occupation may include student or homemaker, if it applies.	Employer's address					ofview C ville, IL 6		
		How long employed the	here?				1 year		
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	eport for a	any lir	ne, write \$0 in the	space. In	clude your non-f	iling
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mploy	ers for that pers	on on the l	ines below. If yo	u need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	0.00	\$	1,554.04	
3.	Estimate and list monthly overti	me pay.		3.	+\$_	0.00	+\$	0.00	

Calculate gross Income. Add line 2 + line 3.

0.00

1,554.04

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Debtor 1 Urbano Villasano Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 0.00 \$ 1,554.04 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. \$ 0.00 286.07 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 Voluntary contributions for retirement plans 5c. 0.00 0.00 5c. \$ 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 Insurance 5e. 5e. 0.00 0.00 **Domestic support obligations** 0.00 5f. 5f. 0.00 5q. **Union dues** 5g. \$ 0.00 \$ 0.00 5h. Other deductions. Specify: 5h.+ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 286.07 7. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$ 0.00 \$ 1,267.97 List all other income regularly received: Net income from rental property and from operating a business, Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8h Interest and dividends 8b. \$ 0.00 \$ 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 8e. **Social Security** 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: Link 143.00 \$ 0.00 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 Other monthly income. Specify: 8h.+ \$ \$ 8h. 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 143.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 143.00 \$ \$ 1,410.97 1.267.97 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 1,410.97 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. 

Yes. Explain:

Debtor is in the process of getting social security disability. He has received minor settlements from worker's compensation settlements.

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Fill	in this information to identify you	r case:									
Deb	urbano Villasa	ano			Ch	eck if this is:					
						An amended filing					
	ouse, if filing)						wing postpetition chapter f the following date:				
Unit	ed States Bankruptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS	MM / DD / YYYY						
	e number nown)										
Of	fficial Form 106J										
	chedule J: Your E						12/15				
info	as complete and accurate as p ormation. If more space is need mber (if known). Answer every	ded, atta	ch another sheet to this								
	t 1: Describe Your Househ	old									
1.	Is this a joint case?										
	■ No. Go to line 2.  □ Yes. <b>Does Debtor 2 live in</b>	a separ	ate household?								
	☐ No ☐ Yes. Debtor 2 must	file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.					
2.	Do you have dependents?	■ No									
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?				
	Do not state the						□ No				
	dependents names.						☐ Yes				
							☐ No				
							Yes				
							□ No				
							Yes				
							□ No				
•	Da como como como de como de						Yes				
3.	Do your expenses include expenses of people other that yourself and your dependent	an _	No Yes								
Est exp	t 2: Estimate Your Ongoing imate your expenses as of you penses as of a date after the bablicable date.	ır bankr	uptcy filing date unless y								
the	lude expenses paid for with no value of such assistance and ficial Form 106l.)					Your exp	penses				
4.	The rental or home ownershi payments and any rent for the			nclude first mortgage	4.	\$	775.00				
	If not included in line 4:										
	4a. Real estate taxes				4a.	\$	0.00				
	4b. Property, homeowner's,	or renter	's insurance		4b.	·	0.00				
	4c. Home maintenance, repa				4c.	·	0.00				
	4d. Homeowner's associatio	n or con	dominium dues		4d.	\$	0.00				

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Deb	tor 1	Urbano \	/illasano	Case n	umb	per (if known)		
6.	Utilit	ies:						
	6a.		heat, natural gas	6	Sa.	\$	60.00	
	6b.	Water, sev	wer, garbage collection	6	Sb.	\$	0.00	
	6c.	Telephone	e, cell phone, Internet, satellite, and cable serv	rices 6	Эc.	\$	198.00	
	6d.	Other. Spe	ecify:	6	Sd.	\$	0.00	
7.			ekeeping supplies		7.	\$	500.00	
8.			hildren's education costs		8.	\$	0.00	
9.			ry, and dry cleaning		9.	\$	0.00	
		•	products and services		10.	\$	100.00	
11.		-	ntal expenses		11.	·	0.00	
			Include gas, maintenance, bus or train fare.			*	<u> </u>	
Do not include car payments.								
13.			clubs, recreation, newspapers, magazines	and books 1	13.	\$	100.00	
			ributions and religious donations		14.	\$	0.00	
15.	Insu	rance.	•					
	Do no	ot include in	surance deducted from your pay or included i	n lines 4 or 20.				
	15a.	Life insura	nce	15	ōа.	\$	0.00	
	15b.	Health ins	urance	15	ōb.	\$	0.00	
	15c.	Vehicle ins	surance	15	5c.	\$	189.00	
	15d.	Other insu	rance. Specify:	15	ōd.	\$	0.00	
16.	Taxe	s. Do not in	clude taxes deducted from your pay or include	ed in lines 4 or 20.				
	Spec	cify:		1	16.	\$	0.00	
17.			ease payments:					
	17a.	Car payme	ents for Vehicle 1	17	7a.	\$	0.00	
	17b.	Car payme	ents for Vehicle 2	17	7b.	\$	0.00	
	17c.	Other. Spe	ecify:	17	7c.	\$	0.00	
	17d.	Other. Spe			7d.	\$	0.00	
18.			of alimony, maintenance, and support that				0.00	
			your pay on line 5, Schedule I, Your Incom	(	18.	\$	0.00	
19.			s you make to support others who do not li	-		\$	0.00	
	Spec	· —			19.			
20.			erty expenses not included in lines 4 or 5 o					
			s on other property		)a.		0.00	
		Real estat			Db.	·	0.00	
			nomeowner's, or renter's insurance		C.		0.00	
			ice, repair, and upkeep expenses		Od.	·	0.00	
			er's association or condominium dues			\$	0.00	
21.	Othe	er: Specify:		2	21.	+\$	0.00	
22	Calc	ulate vour i	monthly expenses					
22.		Add lines 4	•			\$	2,022.00	
			2 (monthly expenses for Debtor 2), if any, fron	Official Form 106 L-2		\$	2,022.00	
		. ,	, , ,			Ψ		
	22c.	Add line 22a	a and 22b. The result is your monthly expens	es.		\$	2,022.00	
23.	Calc	ulate vour i	monthly net income.		L			
			12 (your combined monthly income) from Sch	edule I. 23	За.	\$	1,410.97	
			monthly expenses from line 22c above.		3b.	•	2,022.00	
			— — — — — — — — — — — — — — — — —				2,022.00	
	23c.	Subtract v	our monthly expenses from your monthly inco	me.				
			is your monthly net income.	23	3c.	\$	-611.03	
			•		,			
24.			an increase or decrease in your expenses					
			ou expect to finish paying for your car loan within the terms of your mortgage?	year or do you expect your mortga	ge p	payment to increas	se or decrease because of a	
	_		terms or your mortgage?					
	■ No		[=					
	☐ Ye	es.	Explain here:					

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Fill in this inform	nation to identify your	case:			
Debtor 1	Urbano Villasano	)			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
, , ,					
United States Ban	hkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	106Dec				
		n Individua	l Dobtoric Sa	shadulas	
Deciarati	on About a	in marvidua	l Debtor's So	inedules .	12/15
	U.S.C. §§ 152, 1341, 7				
Did you pay	or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
— П Yes. Na	ame of person			Attach Pani	kruptcy Petition Preparer's Notice,
☐ 162. No					, and Signature (Official Form 119)
					,
	y of perjury, I declare true and correct.	that I have read the sur	nmary and schedules fil	ed with this declaration	on and
X /s/ Hrha	ıno Villasano		X		
	Villasano		Signature o	f Debtor 2	
	e of Debtor 1		2.9		
Date <b>J</b> ı	une 29, 2016		Date		

Fill in th	his information to identify yo	ur case:			
Debtor '	1 Urbano Villasa	no			
Dalatan	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if		Middle Name	Last Name		
United S	States Bankruptcy Court for the	e: NORTHERN DISTRICT O	OF ILLINOIS		
Case nu (if known)	umber			_	check if this is an mended filing
State Be as co	omplete and accurate as postion. If more space is needed	Affairs for Individ	re filing together, both are	equally responsible for sup	
number Part 1:	(if known). Answer every quality Give Details About Your M	estion. //arital Status and Where You	Lived Before		
	at is your current marital sta		Elived Belove		
	Married Not married				
2. Dur	ring the last 3 years, have yo	u lived anywhere other than v	where you live now?		
	Na				
	No Yes. List all of the places you	ı lived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
De	btor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
		ever live with a spouse or leg California, Idaho, Louisiana, Nev			
■	No Yes. Make sure you fill out S	chedule H: Your Codebtors (Off	ficial Form 106H).		
Part 2	Explain the Sources of Yo	our Income			
Fill	in the total amount of income y	employment or from operating you received from all jobs and a but have income that you receive	ill businesses, including part	time activities.	ndar years?
■	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	t calendar year: ry 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$43,124.00	☐ Wages, commissions, bonuses, tips	

☐ Operating a business

☐ Operating a business

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Case number (if known) Document Debtor 1 Urbano Villasano

	Debtor 1		1				Debtor 2						
			s of income Il that apply.	(befo	ss income are deductions and asions)	d	Sources of inco		Gross income (before deductions and exclusions)				
For the calendar year before that: (January 1 to December 31, 2014)		■ Wage	/ages, commissions, \$53,58 ses, tips			00	☐ Wages, components, tips	missions,					
						☐ Oper	ating a business				☐ Operating a l	ousiness	
For the calendar year: (January 1 to December 31, 2013)			■ Wage	iges, commissions, \$4 es, tips			00	☐ Wages, commissions, bonuses, tips					
						☐ Oper	ating a business				☐ Operating a I	ousiness	
	r the canuary				31, 2012 )	■ Wage	es, commissions,		\$48,465.0	00	☐ Wages, combonuses, tips	missions,	
						☐ Oper	ating a business				☐ Operating a I	ousiness	
and other public benefit payments; public winnings. If you are filing a joint case.  List each source and the gross incoming.  No Yes. Fill in the details.						e and you	have income that	you rece	ived together, list	t it on	ly once under De	btor 1.	gambling and lottery
						Debtor 1	l				Debtor 2		
							of income	each (befo	ss income from a source ore deductions and usions)	d	Sources of inco		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certa	ain Pa	yments You	Made Bet	fore You Filed for	Bankru	ptcy				
6.	_	either No.	Neit indiv Durii	<b>her De</b> vidual բ ng the	ebtor 1 nor Dorimarily for a 90 days before Go to line 7 List below 6	ebtor 2 h personal, re you file each credit	family, or househod for bankruptcy, do not to whom you pa	umer de old purpo lid you pa aid a tota	bts. Consumer d se." ay any creditor a solution of \$6,425* or mo	total o	of \$6,425* or mor	e? ments and th	(8) as "incurred by an e total amount you and alimony. Also, do
not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date								r after the date of	adjustment.	·			
	•	Yes.					ve primarily const d for bankruptcy, d			total o	of \$600 or more?		
				No.	Go to line 7								
				Yes	include pay	ments for	or to whom you pa domestic support c ruptcy case.						creditor. Do not nclude payments to an
Creditor's Name and Address					Dates of payme	ent	Total amount		Amount you still owe	Was this p	ayment for		

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Debtor 1 Urbano Villasano

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7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners r more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case			Status of the case	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  ■ No. Go to line 11.  □ Yes. Fill in the information below.  Creditor Name and Address			oreclosed, garnis	hed, attached	d, seized, or levied?  Value of the property
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess			efit of creditors, a
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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Debtor 1 Urbano Villasano 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of **Person Who Received Transfer** Describe any property or Date transfer was property transferred payments received or debts Address made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. П Name of trust Description and value of the property transferred **Date Transfer was** 

made

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Debtor 1 Urbano Villasano

Document

Pa	rt 8: List of Certain Financial Accounts, Inst	truments, Safe Depos	it Boxes, and S	torage Unit	s			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.							
		Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	r bankruptcy, a	ny safe dep	oosit box or other depo	sitory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		
Pa	rt 9: Identify Property You Hold or Control f	or Someone Else						
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value		
Pa	rt 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground					
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or to own, operate, or utilize it, including disposal sites.					te, or utilize it or used			
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, o		as a hazardous	s waste, ha	zardous substance, tox	cic substance,		
Rep	port all notices, releases, and proceedings that	t you know about, reg	ardless of whe	n they occu	ırred.			
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable	under or i	n violation of an enviro	nmental law?		

No

Name of site

☐ Yes. Fill in the details.

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

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Del	btor 1 <b>Urba</b>	ino Villasano	Document 1 age 40 t	Case r	umber ( <i>if known</i> )	
25.	Have you no	otified any governmental unit of	any release of hazardous material?			
	■ No □ Yes, Fil	II in the details.				
	Name of sit		Governmental unit Address (Number, Street, City, State at ZIP Code)		vironmental law, if you ow it	Date of notice
26.	Have you be	een a narty in any judicial or ada	ministrative proceeding under any env	/ironmer	tal law? Include settlements	and orders
20.	_	seri a party in any judiciai or adi	ministrative proceeding under any env	, ii Oillillei	nariaw: morade settlements	and orders.
		ll in the details.				
	Case Title Case Numb	per	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the case	Status of the case
Pai	rt 11: Give D	Details About Your Business or	Connections to Any Business			
27.	☐ A so ☐ A mo ☐ A pa ☐ An c ☐ An c ☐ No. No.	ole proprietor or self-employed in the proprietor of a limited liability compartner in a partnership officer, director, or managing expowner of at least 5% of the voting ne of the above applies. Go to be neck all that apply above and file	g or equity securities of a corporation Part 12. I in the details below for each busines	r, either f	ull-time or part-time	
	Business N Address (Number, Stree	lame	Describe the nature of the business  Name of accountant or bookkeeper	D	mployer Identification numbe o not include Social Security ates business existed	
28.	institutions,	ars before you filed for bankrup creditors, or other parties. Il in the details below.	tcy, did you give a financial statement			ude all financial
	Name		Date Issued			
	Address (Number, Stree	et, City, State and ZIP Code)				
Pai	rt 12: Sign E	Below				
are with 18 U	true and corr n a bankruptc J.S.C. §§ 152,	ect. I understand that making a cy case can result in fines up to , 1341, 1519, and 3571.	nancial Affairs and any attachments, a false statement, concealing property \$250,000, or imprisonment for up to 2	, or obtai	ning money or property by fra	
	Urbano Vill bano Villasa		Signature of Debtor 2			
_	nature of De		orginature of Deptor 2			
Dat	te June 29	, 2016	Date			
Did ■ N	No	dditional pages to Your Stateme	ent of Financial Affairs for Individuals	Filing fo	<i>r Bankruptcy</i> (Official Form 1	07)?
		gree to pay someone who is no	t an attorney to help you fill out bankr	uptcy fo	rms?	
	No ∕es. Name of I	Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declarat	tion, and	Signature (Official Form 119).	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Case number (if known)

Document Debtor 1 Urbano Villasano

Official Form 107

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Urbano Villasano	)		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a  Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Page 43 of 52 Document Debtor 1 Urbano Villasano Case number (if known) name: ☐ Yes ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended.

Tou may assume an unexpired personal property lea	se if the trustee does not assume it. 11 0.3.6. § 303(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicate property that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X _/s/ Urbano Villasano	x
Urbano Villasano Signature of Debtor 1	Signature of Debtor 2
Date <b>June 29, 2016</b>	Date

### Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

6/29/16 5:45PM

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

6/29/16 5:45PM

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-21163 Doc 1 Filed 06/29/16 Entered 06/29/16 17:46:52 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

In re	e Urbano Villasano		Case No	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pa	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,800.00
	Prior to the filing of this statement I have received		\$	1,800.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comper	nsation with any other person	unless they are me	mbers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspec	ts of the bankruptcy	case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and renderi</li> <li>b. Preparation and filing of any petition, schedules, staten</li> <li>c. Representation of the debtor at the meeting of creditors</li> <li>d. Representation of the debtor in adversary proceedings</li> <li>e. [Other provisions as needed]</li> <li>Filing Fee of \$306.00</li> <li>Credit Report of \$50.00</li> <li>Credit Counseling Course \$30.00</li> </ul>	nent of affairs and plan which and confirmation hearing, a	h may be required; nd any adjourned h	
6.	By agreement with the debtor(s), the above-disclosed fee of Final Financial Management Course is to Any fees to reopen said Bankruptcy case	be paid by the client.		r by the client.
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement fo	r payment to me for	representation of the debtor(s) in
	June 29, 2016	/s/ Caroline M. H	ernandez	
	Date	Caroline M. Hern	andez 6273476	
		Signature of Attorn Hernandez Law 76 S. Grove Ave	Office Ltd.	

Elgin, IL 60120

Name of law firm

847-468-1200 Fax: 847-628-0184 carolinehdz@yahoo.com

## **United States Bankruptcy Court**Northern District of Illinois

		Tior theri District of Inniois		
In re	Urbano Villasano		Case No.	
		Debtor(s)	Chapter 7	•
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	26
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and co	rrect to the best of my
Date:	June 29, 2016	/s/ Urbano Villasano Urbano Villasano Signature of Debtor		

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

ATI Physical Therapy 790 Remington Blvd Bolingbrook, IL 60440

Aurora Emergency Associates P.O. Box 5990 Carol Stream, IL 60197

Cap1/carsn Po Box 30253 Salt Lake City, UT 84130

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Creditors Discount & Audit Co. 415 E. Main St., Streator, IL 61364

Fox Valley Cardiovascular Consultan P.O. Box 2091 Aurora, IL 60507

IL Bone and Joint Institute CH 5057 Paysphere Circle Chicago, IL 60674

Joliet Radiological S.C. 36910 Treasury Center Chicago, IL 60694

Lou Harris Company 1040 S Milwaukee Ave Ste Wheeling, IL 60090

Mrsi 2250 E Devon Ave Ste 352 Des Plaines, IL 60018

Nationwide Credit & Collection Inc c/o Evergreen Bank Group P.O. bodx 3219 Hinsdale, IL 60522

Neuro Oversight LLC 2024 Hickory Rd, St 301 Homewood, IL 60430

Ocwen Loan Sevicing Llc Attn: Research Dept 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409

Preferred Captial Funding 368 W. Huron St Suite 4S Chicago, IL 60654

Provena Mercy Medical Center 75 Remittance Dr. Suite 1871 Chicago, IL 60675

Rush Copley Medical Center 2000 Oegden Ave. Aurora, IL 60504

Rush University Medical Group 75 Remittance Dr. Dept 1611 Chicago, IL 60675

Saint Joseph Hospital PL 2900 North Lake Shore Drive Chicago, IL 60657

Smithfield 410 Kirk Road Saint Charles, IL 60174

VNA Health Care 400 North Highland Ave Aurora, IL 60506

Wells Fargo Bank Card Mac F82535-02f Po Box 10438 Des Moines, IA 50306

Windy City Anesthesia PC 21120 Washington Parkway Frankfort, IL 60423